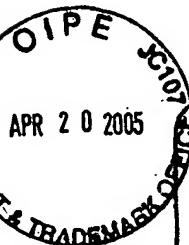


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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/691,309
Filing Date	10/22/03
First Named Inventor	James B. Crawford
Art Unit	3872
Examiner Name	Neuder, William P
Attorney Docket Number	PET-004-CIP2

I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Edward R. Lamb		
Signature	<i>Edward R. Lamb</i>		
Date	4-18-05	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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